

STATE OF MARYLAND

DHMH

Maryland Department of Health and Mental Hygiene

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April 8, 2009

Public Health & Emergency Preparedness Bulletin: # 2009:13 Reporting for the week ending 04/04/09 (MMWR Week #13)

CURRENT HOMELAND SECURITY THREAT LEVELS

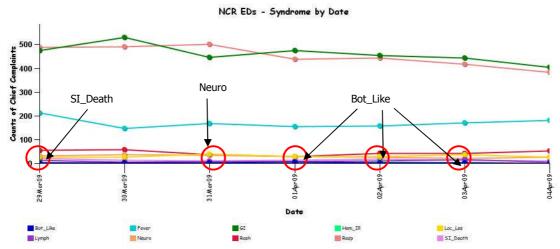
National: Yellow (ELEVATED) *The threat level in the airline sector is Orange (HIGH)

Maryland: Yellow (ELEVATED)

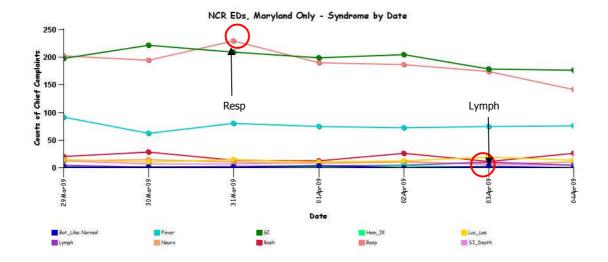
SYNDROMIC SURVEILLANCE REPORTS

ESSENCE (Electronic Surveillance System for the Early Notification of Community-based Epidemics): Graphical representation is provided for all syndromes, excluding the "Other" category, all age groups, and red alerts are circled. Note: ESSENCE – ANCR Spring 2006 (v 1.3) now uses syndrome categories consistent with CDC definitions.

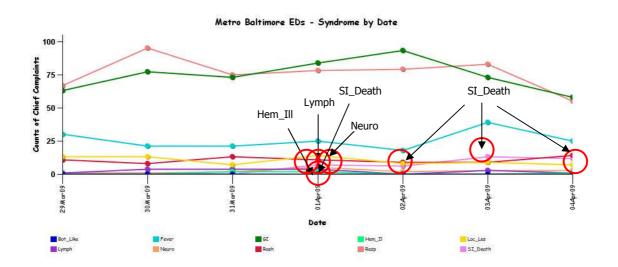
Overall, no suspicious patterns of illness were identified. Track backs to the health care facilities yielded no suspicious patterns of illness.



 $^{^{}st}$ Includes EDs in all jurisdictions in the NCR (MD, VA, DC) under surveillance in the ESSENCE system.

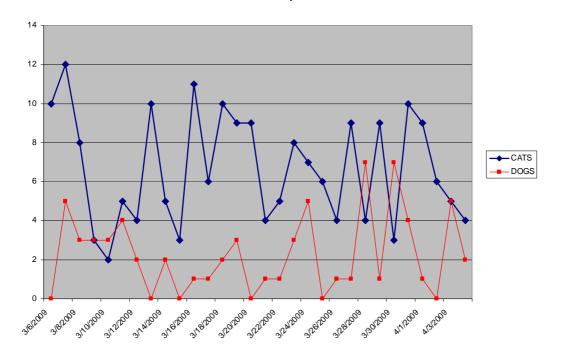


^{*} Includes only Maryland EDs in the NCR (Prince George's and Montgomery Counties) under surveillance in the ESSENCE system.



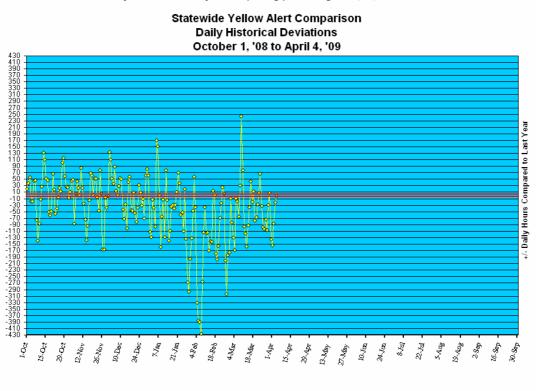
^{*} Includes EDs in the Metro Baltimore region (Baltimore City and Baltimore County) under surveillance in the ESSENCE system.

BALTIMORE CITY SYNDROMIC SURVEILLANCE PROJECT: No suspicious patterns in the medic calls, ED Syndromic Surveillance and the animal carcass surveillance. Graphical representation is provided for animal carcass surveillance 311 data. **Dead Animal Pick-Up Calls to 311**



REVIEW OF EMERGENCY DEPARTMENT UTILIZATION

YELLOW ALERT TIMES (ED DIVERSION): The reporting period begins 10/01/08.



REVIEW OF MORTALITY REPORTS

Office of the Chief Medical Examiner: OCME reports no suspicious deaths related to BT for the week.

MARYLAND TOXIDROMIC SURVEILLANCE

Poison Control Surveillance Monthly Update: Investigations of the outliers and alerts observed by the Maryland Poison Center and National Capital Poison Center in March 2009 did not identify any cases of possible terrorism events.

REVIEW OF MARYLAND DISEASE SURVEILLANCE FINDINGS

COMMUNICABLE DISEASE SURVEILLANCE CASE REPORTS (confirmed, probable and suspect):

Meningitis:	<u>Aseptic</u>	Meningococcal
New cases (Mar 29 – Apr 4, 2009):	18	0
Prior week (Mar 22 – Mar 28, 2009):	12	0
Week#13, 2008 (Mar 23 – Mar 29, 2008):	03	0

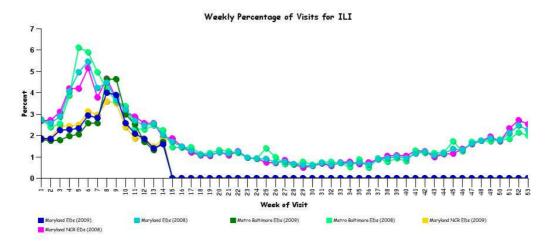
OUTBREAKS: 2 outbreaks were reported to DHMH during MMWR Week 13 (March 29 - April 4, 2009):

- 1 Respiratory illness outbreak
- 1 outbreak of ILI associated with a Nursing Home
- 1 Other outbreak
- 1 outbreak of CONJUNCTIVITIS associated with a School

MARYLAND SEASONAL FLU STATUS: Influenza activity in Maryland for Week 13 is LOCAL. During Week 13, 159 confirmed cases of influenza were reported to DHMH.

SYNDROMIC SURVEILLANCE FOR INFLUENZA-LIKE ILLNESS:

Graph shows the percentage of total weekly Emergency Department patient chief complaints that have one or more ICD9 codes representing provider diagnoses of influenza-like illness. This graph does not represent confirmed influenza.



PANDEMIC INFLUENZA UPDATE / AVIAN INFLUENZA-RELATED REPORTS

WHO Pandemic Influenza Phase: Phase 3/4: No or very little human-to-human transmission/Small clusters with limited human-to-human transmission, suggesting that the virus is not well adapted to humans

US Pandemic Influenza Stage: Stage 0/1: New domestic animal outbreak in at-risk country/Suspected human outbreak overseas

*More information regarding WHO Pandemic Influenza Phase and US Pandemic Influenza Stage can be found at: http://bioterrorism.dhmh.state.md.us/flu.htm

WHO update: As of March 30, 2009, the WHO-confirmed global total of human cases of H5N1 avian influenza virus infection stands at 413, of which 256 have been fatal. Thus, the case fatality rate for human H5N1 is about 62%.

AVIAN INFLUENZA, HUMAN (Egypt): 04 Apr 2009, An Egyptian toddler has contracted the highly pathogenic bird flu virus, the latest in an upswing of cases in the most populous Arab country, stated news agency MENA said 3 Apr 2009. The case brings to 62 the number of confirmed cases of the H5N1 avian influenza virus in Egypt, which has been hit harder by bird flu than any other country outside of Asia and has reported 7 human infections since 1 Mar 2009. The 21-month-old boy is from the province of Beheira in northern Egypt and was in a "good" condition after being treated with the antiviral drug Tamiflu, MENA reported. The new infection came several days after a 2-year-old boy from the same province contracted the virus. MENA did not say how the child contracted the virus, but most Egyptians who have fallen ill with bird flu are believed to have contracted the virus from infected household birds.

AVIAN INFLUENZA, HUMAN (Indonesia): 03 Apr 2009, The death of a 2-year-old child in Pekanbaru (Riau), subsequently confirmed as due to bird flu, has alarmed his family and neighbors. They are afraid that virus is still circulating and taking lives. In particular the child's 42-year-old father has developed a high fever. This occurrence is mentioned by the Head of Monitoring and Disaster Section of the Health Service Pekanbaru, Naviri (1 Apr 2009) while her team was inspecting the victim's house. She also mentioned that the victim's 59- and 67-year-old grandparents were also developing high fever. They latter have been treated intensively at Arifin Ahmad regional hospital. Meanwhile, the victim's father remains under intensive care. The hospital has collected their blood samples for further test. Naviri said the health service is now engaged in data recording and surveillance around the outbreak location. Agriculture service officers of Pekanbaru, Sentot Djoko Prayitno have carried out chicken depopulation measures and disinfection within an area of 100 square meters around the victim's house.

AVIAN INFLUENZA, HUMAN (Egypt): 02 Apr 2009, A 2-year-old Egyptian boy has contracted the highly pathogenic bird flu virus, bringing to 61 the number of confirmed cases in the country, state news agency MENA said 1 Apr 2009. Egypt has seen an upswing in bird flu cases over the past month, with 6 new human infections. The boy, from the province of Beheira in northern Egypt, was believed to have contracted the H5N1 virus after coming into contact with infected birds, MENA quoted health ministry spokesman Abdel Rahman Shahine as saying. The boy was taken to hospital on Monday 30 Mar 2009 after he came down with a high fever while visiting extended family in another province. He was being treated with the antiviral drug Tamiflu.

AVIAN INFLUENZA, HUMAN, SUSPECTED (Indonesia): 31 Mar 2009, A 50-year-old female resident of Karawang District is suspected to have contracted bird flu virus. The victim was admitted to Hasan Sadikin hospital on 29 Mar 2009 by recommendation of Dewi Sri clinic, Karawang. According to the patient's 40-year-old wife, her husband developed fever and breathing difficulty signs. He was then brought to Ramerta clinic and then directed to the Dewi Sri clinic. The patient's wife said that the doctor at Dewi Sri clinic told her that her husband has developed bird flu symptoms, but the diagnosis had still to be confirmed. The woman also mentioned that her husband had fever and breathing problems before 21 Mar. But then the symptoms had diminished by 23 Mar. During the past 2 weeks a number of chickens were found suddenly dead in the victim's area. "My husband is the only one who developed symptoms," she added.

AVIAN INFLUENZA (India): 30 Mar 2009, North Dinajpur district administration has decided to kill around 14,000 birds in several villages under Daspara and Ghinnigaon gram panchayats [villages] near the Chopra police station of the district in the next 4 days. The decision followed the official announcement declaring the block as bird flu affected. It was reported that hundreds of birds died in the region over the past week, alarming the district administration. The North Dinajpur animal husbandry department officials promptly visited the 'affected' villages and collected samples from the dead birds, which were later sent to a Pune-based national laboratory. The laboratory report confirmed bird flu in the area. The culling exercise is scheduled to commence tomorrow. The deputy director of the North Dinajpur animal husbandry department, Mr Sajal Bhunia, said that his department had formed around 40 teams to complete the exercise at the earliest.

AVIAN INFLUENZA, HUMAN (Egypt): 30 Mar 2009, The Ministry of Health and Population of Egypt has reported a new confirmed human case of avian influenza. The case is a 2.5-year-old female from Qena District, Qena Governorate. Her symptoms began on 23 Mar 2009. She was admitted to Qena Fever Hospital on 24 Mar where she was started on oseltamivir treatment the same day and remains in a stable condition. Infection with H5N1 avian influenza was confirmed by the Egyptian Central Public Health Laboratory on 26 Mar. Investigations into the source of infection indicate a history of close contact with dead and sick poultry prior to becoming ill.

NATIONAL DISEASE REPORTS:

SALMONELLOSIS, SEROTYPE RISSEN, SPICES (USA): 02 Apr 2009, Union International Food Co. of Union City, California, is recalling 15-pound and smaller size packages of the Lian How brand spices and Uncle Chen brand white pepper and black pepper (whole and ground) in 5-ounce retail containers, because it has the potential to be contaminated with Salmonella. Officials investigating a multi-state salmonellosis outbreak isolated the organism from an open container of Lian How White Pepper, which was found at a restaurant where some outbreak victims ate. The Lian How brand spices are distributed in the states of California, Oregon and Washington to wholesalers, distributors, restaurant suppliers and restaurants. The Lian How brand products are packaged in 10- or 15-pound boxes with plastic liners, 5-pound plastic jars or 5-pound plastic bags (and 2.2-pound foil bags of Wasabi powder). The Lian How brand products are not generally sold directly to the retail consumer. The Uncle Chen brand white and black pepper products (whole or ground) are sold at retail in 5-ounce containers. Union International Foods Company has ceased the production and distribution of these products as the FDA, California Department of Public Health and Union International Foods Co. continue the investigation as to nature and full extent of this potential contamination. 42 people in 4 states have become ill from Salmonella Rissen, but no deaths have been reported. (Food Safety Threats are listed in Category B on the CDC list of Critical Biological Agents) *Non-suspect case

SALMONELLOSIS, PISTACHIO NUTS, RECALL (USA, Canada, Philippines, Hong Kong): 01 Apr 2009, This week, 2 million pounds of pistachios were recalled because of concerns about contamination. A small Skokie, IL, firm called the Georgia Nut Co. bought pistachios from Setton Pistachio of Terra Bella, CA, and then, as part of its routine food-safety efforts, had them tested for salmonella. "We have a pretty rigorous product-testing regime," spokesman Joshua Robbins says. The test came back positive for Salmonella, and the company issued a recall on 25 Mar 2009 for the nuts it had sent to a small number of Chicago-area stores. It also informed Kraft Foods, for which it produced and packaged Nantucket Blend Trail Mix under the Back to Nature Foods label. Kraft issued a recall for the trail mix, which contains pistachios, the same day. Kraft has also recalled all Planters products containing pistachios, and Frito-Lay has recalled its in-shell pistachios. The Kroger supermarket chain of Cincinnati has recalled its Private Selection Shelled Pistachios. Setton Pistachio sold its pistachios in 1000- and 2000-pound containers to about 30 wholesalers. FDA officials say they expect the pistachio recall to become larger as makers of pistachio-containing products such as ice cream, candy and trail mix realize that their foods contain Setton pistachios. While it's not yet known how Setton's nuts were tainted, company officials say they believe the processed nuts may have come in contact with raw pistachios that carried the bacteria. The Canadian Food Inspection Agency, The Bureau of Food and Drugs (BFAD) in the Philippines, and the The Center for Food Safety (CFS) of Hong Kong have also advised individuals of the possible contamination of the recalled USA pistachio products that have been imported to these locations. (Food Safety Threats are listed in Category B on the CDC list of Critical Biological Agents) *Non-suspect case

LISTERIOSIS, MEXICAN-STYLE CHEESES, RECALL (USA): 01 Apr 2009, Torres Hillsdale Country Cheese of Reading, Michigan, is expanding the recall of Asadero and Oaxaca soft Mexican-style cheeses due to potential Listeria contamination. Consumption of food contaminated with Listeria monocytogenes can cause Listeriosis, an uncommon but potentially fatal disease. Listeriosis can cause high fever, severe headache, neck stiffness and nausea. It can also cause miscarriages and stillbirths. The very young, the pregnant, the elderly and persons with compromised immune systems are the most susceptible to infection. People experiencing these problems should seek immediate medical attention. Products were distributed to the following states: Illinois, Indiana, Michigan, Georgia, Tennessee, Kentucky, North Carolina, South Carolina, Ohio, Wisconsin, New Jersey, Pennsylvania, Florida, and Alabama. A routine sample of Asadero cheese, taken by an inspector from the Michigan Department of Agriculture's Food and Dairy Division on 23 Feb was subsequently tested by the Michigan Department of Agriculture Laboratory and discovered to be contaminated with Listeria. The recalled Asadero and Oaxaca cheese products were distributed to retails stores and delis in 10-pound balls, 16- and 12-ounce plastic packages, sold under the name "Aguas Calientes." Product was also sold in 6-pound blocks shrink-wrapped in clear plastic, under the name "El Jaliciense." Packaging may also include a label with the name "Torres Hillsdale Country Cheese LLC." The recall includes all production dates between 1 Aug 2008 (expiration date 29 Oct 2008) and 27 Feb 2009 (expiration date 10 May 2009). No illnesses have been reported to date in connection with the recalled products. Consumers and retailers are urged to return all unused recalled product to the manufacturer. (Food Safety Threats are listed in Category B on the CDC list of Critical Biological Agents) *Non-suspect case

INTERNATIONAL DISEASE REPORTS:

EBOLAVIRUS, NEEDLE STICK INJURY (Germany): 04 Apr 2009, A researcher who may have been exposed to the deadly ebolavirus was declared healthy and released from isolation at a German hospital Thursday [2 Apr 2009], having been spared the horrific symptoms of the disease. The woman had accidentally pricked her finger 3 weeks ago [12 Mar 2009] with a needle used to inject Ebola into mice. It was not known if the virus actually entered her bloodstream, but she was given an experimental vaccine just in case. The vaccine had never been tested on humans. Scientists don't know if the vaccine saved her or if she was simply lucky not to get the disease during an excruciating 21-day waiting period. "The patient is healthy. We're happy about that," said Dr Stefan Schmiedel, who attended to her at a Hamburg hospital. Doctors said they would now study her immune response for evidence of whether she actually contracted the virus, and whether the vaccine helped her defeat it. (Viral hemorrhagic fevers are listed in Category A on the CDC list of Critical Biological Agents) *Non-suspect case

Q FEVER, CAPRINE (Netherlands): 31 Mar 2009, A goat farm in the southern province of Limburg has been

quarantined following an outbreak of the flu-like disease Q fever, news agency ANP reports on Monday [30 Mar 2009]. The farm, which has 1000 animals, is the 2nd where Q fever has been found this year [2009], ANP says. Last year [2008], there was an outbreak in Noord-Brabant province. Q fever is spread by livestock, which shed the bacteria in urine, feces, birth products and milk. The disease, which leads to spontaneous abortion in sheep and goats, causes flulike symptoms in humans and can lead to lung infections. (Q fever is listed in Category B on the CDC list of Critical Biological Agents) *Non-suspect case

ANTHRAX, HUMAN, OVINE (India): 31 Mar 2009, In what is reported to be an isolated outbreak of anthrax in the country, 5 persons were diagnosed with it in Prakasam district today [30 Mar 2009]. They were taken ill after consuming meat from affected sheep reared at Kalluru village in Kurichedu mandal of Prakasam district. Experts from the Animal Husbandry Department confirmed reports that 200 of the sheep reared in Kalluru village were affected with anthrax, while there are chances of many more such cases. Following reports that 200 sheep died, the veterinary doctor at Kurichedu mandal rushed to the village and alerted deputy director of Animal Husbandry K Niranjan. Niranjan rushed a medical team to the village, which took samples of the dead sheep, conducted tests, and confirmed that death was due to anthrax. The Animal Husbandry Department has set up a medical camp at the village and also conducted tests on people to check if they have been affected by the disease. "We have quarantined the 10 persons, who reportedly ate the meat of the affected sheep. We are also conducting a door-to-door survey to know, if anybody else consumed the contaminated meat" Niranjan said. The 10 persons were administered anti-anthrax vaccine. Niranjan said that they had identified that around 8000 more sheep were being reared within 5 km radius of Kalluru village and the Animal Husbandry Department had formed special teams to visit all the villages and vaccinate the sheep as a precautionary measure. (Anthrax is listed in Category A on the CDC list of Critical Biological Agents) *Non-suspect case

ANTHRAX, LABORATORY EXPOSURE (France): 29 Mar 2009, An Afssa [Agence francaise de securite sanitaire des aliments] laboratory is contaminated with Bacillus anthracis; 5 laboratory workers have been placed in isolation in a hospital at Maison-Alfort after being in contact with the bacillus. The incident occurred at the laboratory, which works in conjunction with the National reference lab for anthrax (Centre national de reference charbon (CNR charbon)) located in the Pasteur Institute. CNR charbon carries out epidemiologic surveillance on anthrax and characterizes the isolates from cases and outbreaks. (Anthrax is listed in Category A on the CDC list of Critical Biological Agents) *Non-suspect case

OTHER RESOURCES AND ARTICLES OF INTEREST:

More information concerning Public Health and Emergency Preparedness can be found at the Office of Preparedness and Response website: http://bioterrorism.dhmh.state.md.us/

Maryland's Resident Influenza Tracking System: www.tinyurl.com/flu-enroll

NOTE: This weekly review is a compilation of data from various surveillance systems, interpreted with a focus on a potential BT event. It is not meant to be inclusive of all epidemiology data available, nor is it meant to imply that every activity reported is a definitive BT event. International reports of outbreaks due to organisms on the CDC Critical Biological Agent list will also be reported. While not "secure", please handle this information in a professional manner. Please feel free to distribute within your organization, as you feel appropriate, to other professional staff involved in emergency preparedness and infection control.

For questions about the content of this review or if you have received this and do not wish to receive these weekly notices, please e-mail me. If you have information that is pertinent to this notification process, please send it to me to be included in the routine report.

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